POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	A.H.	7399	4/9/00
O.I.P.E. CLASSIFIER		12	4/26
FORMALITY REVIEW	CM	71632	6/12/00
RESPONSE FORMALITY REVIEW	CM	71632	7-20-00

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
–	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim (Final / Original)	Date	Claim (Final / Original)	Date	Claim (Final / Original)	Date
1	✔ ✔ ✔ ✔ ✔	51		101	
2		52		102	
3		53		103	
4		54		104	
5		55		105	
6		56		106	
7	✔ ✔	57		107	
8	0 0	58		108	
9	✔ ✔	59		109	
10	0 ∂	60		110	
11		61		111	
12		62		112	
13		63		113	
14	✔ ✔	64		114	
15	0 0	65		115	
16	✔ ✔	66		116	
17	0 ∂ 0 ∂	67		117	
18	✔ ✔ ✔	68		118	
19	0 0	69		119	
20	0 ∂	70		120	
21	0 ✔	71		121	
22	✔ ✔	72		122	
23		73		123	
24		74		124	
25		75		125	
26		76		126	
27		77		127	
28		78		128	
29		79		129	
30		80		130	
31		81		131	
32	✔ ✔ ✔ ✔	82		132	
33	✔	83		133	
34	N	84		134	
35	✔	85		135	
36		86		136	
37	✔ ✔	87		137	
38		88		138	
39		89		139	
40		90		140	
41		91		141	
42		92		142	
43		93		143	
44		94		144	
45		95		145	
46		96		146	
47		97		147	
48		98		148	
49		99		149	
50		100		150	

If more than 150 claims or 10 actions
staple additional sheet here

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